

# SLOVAK CATHOLIC SOKOL

*A tradition of providing sound financial protection and benefits to our members*

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## Privacy Notice

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### **Privacy Commitment to our Insured**

As a member of the Slovak Catholic Sokol you have provided the organization with certain nonpublic information, such as your name, age, residence, marital status and social security number when you applied for insurance coverage and membership. You also may have provided us with employment and medical information and authorized us to obtain further information concerning your health history and other personal characteristics. Based on this authorization, only the minimum amount of information necessary to underwrite your application has been collected.

We as in the past, maintain the highest levels of confidentiality concerning your nonpublic personal information. The employees at the Home Office have been trained in the careful handling and protection of such information. Oversight of these matters is rigorous and our employees understand that improper disclosure of nonpublic personal information is a serious matter with severe consequences.

We are a fraternal benefit society that has always committed to protecting the privacy of our members. There are no affiliated financial institutions or third party non-affiliates which have access to your nonpublic personal information, except pursuant to your written authorization if you so desire. We never sell list of the names and addresses of our members to any vendor of goods and services.

Access to your records is limited those Home Office employees who are working with your file. Should we be required to disclose information in connection with civil or criminal litigation we must comply, but such instances are exceeding rare.

Should we need to retain another organization to assist with our operations, we will require that it adhere to the same strict standards of confidentiality as we do.

Our policy of protecting the security of nonpublic information also extends to former insureds who no longer have coverage with us.

Finally, please be assured that the information in our insurance files will always be available to our insureds for modification, correction or change when appropriate.

### **Endorsement and Agreement:**

I have read the above and acknowledge this Privacy Statement and agree to the conditions and constraints as they are outlined. As an appointed agent or a staff member of the appointed agent, under contract with the Slovak Catholic Sokol, I promise to abide by this policy and not share non-public information about current and proposed members of the Slovak Catholic Sokol.

Name \_\_\_\_\_  
(Print)

Signature \_\_\_\_\_